



SPECIAL EVENT APPLICATION

Thank you for your interest in holding a Special Event in the City of Joliet. The City of Joliet recognizes that a variety of events held within the City are instrumental in creating a comfortable, and welcoming atmosphere. The unique contributions that special events add to the spirit and vitality of our growing community are an essential part of the City. Events celebrate organizations, further economic growth, blend cultures, create fundraising opportunities for non-profit organizations and increase tourism and recreation. The City of Joliet is proud to host a variety of these events each year, from major festivals, parades and sporting events to local neighborhood gatherings.

This packet contains the information needed to apply for a Special Event Permit, as well as most other required permits related to your event. **Please note: Filming / Media Production is a separate application.**

On page 11 of this packet, you will find a special event checklist, which is designed to help you determine which permits are required for your special event. Some of the information will not apply to your special event. However, all event organizers are required to fill out the Special Event Permit application form in full and submit it with the requested documentation. **All special events must have final approval by the City of Joliet.**

SPECIAL EVENT DEFINITION

A “Special Event” is an event held on public or private property including, but not limited to, parades, festivals, athletic events, concerts, other public meeting and/or an event deemed to significantly impact the city which meet some or all of the following criteria:

- Closure of roads, streets or city blocks (with the exception of block parties)
- Issuance of multiple permits or licenses
- Use of City-owned property
- Use of City services
- Use of amplified sound / outdoor entertainment

In all respects, events shall not significantly or materially be detrimental to the health, safety, and welfare of the public or injurious to other property or improvements in the surrounding area. Factors to be considered in issuing a Special Event Permit include, but are not limited to, excess traffic, parking, noise, pedestrian safety, and adverse effects on neighboring areas.

If your special event meets the above criteria, the event is required to obtain a Special Event Permit.

All event organizers interested in hosting a special event in Joliet must submit the complete permit application to the Special Events Coordinator at a minimum of 60 days prior to the event.

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

Requirements and Conditions

1. **Alcoholic Beverages:** A temporary liquor license is required for the sale of alcoholic beverages. All temporary liquor licenses must be approved by the City of Joliet Liquor Commission. Please contact the Mayor’s Office at 815/724-3700 prior to your event for details on obtaining a license.
2. **Sound Amplification:** A sound amplification permit must be obtained by the City Clerk’s Office for use of any speakers or sound system for an outdoor event. The City of Joliet reserves the right to discontinue the use of any amplified sound if deemed unreasonable to the Joliet Police Department.
3. **Block Parties:** Special event registration is not necessary for block parties; however the City of Joliet requires that a permit be obtained for this type of gathering. For a block party permit application, please visit www.cityofjoliet.info or contact the City Clerk’s Office—Business Services.
4. **Certificate of Insurance:** A Certificate of Insurance naming the City of Joliet and their respective public officials, officers, employees, volunteers, agents and assigns, as an additional insured is required. The insurance policy shall indemnify the applicant and the City against liability for personal injury, death or damage in the following minimum amounts: For the injury or death of any one (1) person—one hundred thousand dollars (\$100,000.00); for the injury or death of more than one (1) person arising from the same accident—three hundred thousand dollars (\$300,000.00); for damage to the property of another, including the city—one hundred thousand dollars (\$100,000.00). *City of Joliet Code of Ordinances Chapter 5, Section 5-36.*
5. **Compliance with City Ordinances:** The applicant shall comply with all applicable City ordinances, codes, requirements and conditions.
6. **Compensation for City Staffing:** All City personnel involved during the day(s) of the event AND in the preparation of the event will be charged back to the sponsoring agency. The bill will be transmitted to the sponsoring agency within sixty (60) working days after the completion of the event.
7. **Food and Beverage Health Inspections:** Food and beverages shall not be sold at an event, unless approved and licensed, if necessary, by the County Health Department. Event organizers are responsible for arranging health inspections for their events. Please call 815/727-8480 (Will County) or 630/553-9100 (Kendall County) for more information. Licenses will not be granted unless proof of health inspection is provided.
8. **Hold Harmless Agreement:** The event organizer must sign a Hold Harmless Agreement, agreeing to indemnify the City of Joliet against any and all actions arising from, during or as a result of the event.
9. **Site Inspection:** A site inspection is required for all events having any of the following: tents, stages, food service, liquor service or amusements. Request for site inspections must be made 7 days prior to the event. Contact the City of Joliet, Building Department at 815/724-4070 to schedule the inspections.

Name of Event:	Date of Event:
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Return Applications to: City of Joliet, City Clerk-Special Events, 150 West Jefferson Street, Joliet, IL 60432
cojspecialevents@jolietcity.org



SPECIAL EVENT APPLICATION

Application Process

- Application Deadline:** Permit applications for special events are due to the City of Joliet’s Special Event Coordinator, at a minimum, **60 days** prior to your event. This allows city staff sufficient time to evaluate your request and provide a recommendation to City Council for consideration, if necessary. You will be notified by the Special Events Coordinator once your permit and inspection, if required, are completed. At that time, you may pick up your permit for the City of Joliet Municipal Building or arrange to have it sent via email or mail. If a site inspection is required and all other documentation and approvals have been received, the inspector may, if available, provide the permit after a successful inspection.
- Submission Process:** Please return all required permit applications and supporting documentation to:

City of Joliet
City Clerk’s Office
Attn: Jessica Marsett, Special Events Coordinator
150 W. Jefferson St.
Joliet, IL 60432
Ph. 815/724-3780
Fax 815/724-3785
cojspecialevents@jolietcity.org

- Permit Fees:** Permit fees (special event, temp. liquor license, sound amp, tents, raffles, etc.)
 - Special Event Permit: \$125.00
 - Sound Amplification: \$20.00
 - Temporary Liquor License \$50.00
 - Tent Inspection \$13.00 per tent
 - Stage Inspection \$50.00 per stage
 - Raffle Permit \$10.00

Other fees are determined based on the information listed on the application. Fees for City staff will be invoiced after the completion of the event.

- Payment:** Payment of the Special Event Permit fee is required at the time of application. Please make checks payable to City of Joliet and note the name of the event on the check. Fees are non-refundable and payment of fees does not guarantee the approval of the permit.

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

GENERAL EVENT INFORMATION

PLEASE COMPLETE THE ENTIRE APPLICATION AND TYPE OR PRINT LEGIBLY. Incomplete forms will NOT be processed.

Name of Event: _____

Type of Event (please check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Athletic/Recreation (5K, 10K, walk-a-thon) | <input type="checkbox"/> Carnival/Amusement |
| <input type="checkbox"/> Car Show | <input type="checkbox"/> Concert/Performance |
| <input type="checkbox"/> Farmer's Market/Outdoor Market | <input type="checkbox"/> Fireworks |
| <input type="checkbox"/> Parade | <input type="checkbox"/> Street Festival |
| <input type="checkbox"/> Meeting | <input type="checkbox"/> Other (please explain) _____ |

Location of Event: _____

Date(s) of Event: _____ Hours of Event: _____

Set-up Date: _____ Set-up Hours: _____

Dismantle Date: _____ Dismantle Hours: _____

Anticipated # of:

Participants: _____ Spectators: _____ Staff/Volunteers: _____

Event Website: _____

Is this an annual (recurring) event? YES NO

If yes, please state any problems and /or incidents that have occurred in past years and what, if anything has been done to resolve the issue for this year: _____

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

GENERAL EVENT INFORMATION

SPONSORING ORGANIZATION INFORMATION

Name of Sponsoring Organization: _____
(Please list the Organization's Legal Status: i.e. NFP, partnership, Corporation, etc.)

Organization's Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Website: _____

Sponsoring Organization Contact Person: _____

Primary Phone: _____ Cell Phone: _____

Email Address: _____

On-Site Event Coordinator: _____

Please check here if same as contact person

Primary Phone: _____ Cell Phone: _____

Email Address: _____

Additional Coordinator: _____

Primary Phone: _____ Cell Phone: _____

Email Address: _____

Is the Sponsoring Organization a bona fide tax exempt, not-for-profit? YES NO
If yes, attach proof of tax exempt status to this application

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

GENERAL EVENT INFORMATION

OPERATIONAL INFORMATION

RESTROOM FACILITIES:

Are restrooms available at the event location? YES NO

If no, please complete the following information:

Name of Company Providing Facilities: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____

Total Number of Restrooms Provided: _____

of Accessible Restrooms: _____ # of Hand Washing Stations: _____

Date Installed: _____ Date Removed: _____

WASTE FACILITIES:

Are waste containers available at the event location? YES NO

If no, please complete the following information:

Name of Company Providing Facilities: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____

Date Installed: _____ Date Removed: _____

Name of Event:

Date of Event:



SPECIAL EVENT APPLICATION

GENERAL EVENT INFORMATION

OPERATIONAL INFORMATION CONTINUED

FOOD

Is food being provided or sold at the event?

YES

NO

*If yes, please provide the following information **FOR EACH VENDOR**:*

Name of Vendor/Company/Restaurant: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____

Name of Vendor/Company/Restaurant: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____

Name of Vendor/Company/Restaurant: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____

Provide additional sheets as necessary.

A permit is required from the County Health Department **for each vendor**. Vendor/Organization is responsible for contacting the Health Department to schedule an inspection. Proof of paid inspection fee is required.

Name of Event:

Date of Event:



SPECIAL EVENT APPLICATION

GENERAL EVENT INFORMATION

SECURITY PLAN

Security Contact Person: _____

Phone: _____ Email: _____

Will you be hiring off-duty Joliet Police Officers for security? YES NO

If yes, be advised that you will be charged for police services which will be billed within 60 days after the event.

If no, complete the following information:

Name of Private Security Company: _____

Street address: _____ City: _____ State: _____ Zip code: _____

Phone: _____ Email: _____

Number of Private Security Personnel per Shift: _____

Expected Attendance: _____

MEDICAL PLAN

Medical Contact Person: _____

Phone: _____ Email: _____

Will Emergency Medical Services be summoned through 911 only? YES NO

If no, complete the information below if required:

Will you be hiring Joliet Fire Department for EMS Services? YES NO

If yes, be advised that you will be charged for EMS services which will be billed within 60 days after the event.

If no, complete the following information:

Name of Licensed EMS Provider: _____

Street address: _____ City: _____ State: _____ Zip code: _____

Phone: _____ Email: _____

Expected Attendance: _____

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

GENERAL EVENT INFORMATION

SITE PLAN / ROUTE MAP

Please use the space below or attach a separate page to illustrate the layout / route for your event.

Site Map with **(please use codes indicated)**

- | | |
|--|---|
| 1. Location of First Aid (+) | 6. Location of Sound Stages (SS) |
| 2. Location of Food Vendors (FV) | 7. Location of Tents (T) and Canopies (C) |
| 3. Location of Alcoholic Beverage Vendors (AB) | 8. Location of Washroom Facilities (WF) |
| 4. Location of Non-Alcoholic Beverage Vendors (NAB) | 9. Fireworks Truck placarded |
| 5. Location of Garbage (G) / Recycling (R) Receptacles | 10. Public Entrances and Exits |

If the event is a 5K/10K run or other type of event with a route, please indicate the planned route with a dashed line

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

TERMS AND CONDITIONS / HOLD HARMLESS

PLEASE INITIAL

- I agree that the information in this application is true and correct to the best of my knowledge.
- I understand the City of Joliet may close my event should we violate City Ordinances, or deviate from the defined, permitted activity.
- I agree to promptly reimburse the City for costs associated with City services.
- I agree to inform the City of any changes to this application.
- I acknowledge that the Event does not owe any monies to the City
- I agree to the requirements and conditions listed on page 2 of this application.

Signature of Organizer _____ Date _____

RELEASE AND HOLD HARMLESS AGREEMENT

_____ (name of org/company) recognizes and acknowledges that there are certain risks associated with a special event within the City of Joliet. By signing this application for a special event, _____ (name of org/company) does hereby agree to assume the full and complete risk of any injuries, damage, or loss regardless of the type or severity, which anyone employed by or used as a volunteer by _____ (name of org/company) may sustain as a result of the special event in the City of Joliet.

_____ (name of org/company) does hereby fully release and discharge the City of Joliet, its officers, agents and employees from any and all claims for injury, damage, or loss sustained by any of its employees or volunteers connected in any way to this special event in the City of Joliet.

_____ (name of org/company) further agrees to indemnify and hold harmless and defend the City of Joliet, its officers, agents and employees from any and all claims, including attorney's fees, resulting from injury, damage or loss sustained by any of its employees or volunteers, or caused by them, and arising out of, or in any way connected or associated with, this special event in the City of Joliet.

I, _____ (representative name) state that I am an authorized representative of _____ (name of org/company) with the authority to execute this agreement. I have read and fully understand the above release and hold harmless agreement, and execute it on behalf of, and as the duly authorized representative of _____ (name of org/company).

Signature of Representative

SUSCRIBED and SWORN to before me this

Date

_____ day of _____, 20____

Notary Public (stamp seal adjacent)

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

ADDITIONAL PERMIT / INFORMATION QUESTIONNAIRE

Please answer the following questions to determine what additional paperwork / approvals are needed:

Are you having a live band or any type of amplified sound? Yes No
If yes, complete and attach **Sound Amplification Permit Application (pg. 12)**

Are you serving alcoholic beverages at the Event? Yes No
If yes, complete and attach **Temporary Liquor License Application (pg. 13)**

Are you erecting a tent over 20 square feet, stage, air-supported structure, or bleachers? Yes No
If yes, complete and attach **Temporary Tent / Stage / Air Supported Structure / Bleacher Application (pg. 14)**

Does your event include fireworks? Yes No
If yes, complete and attach **Fireworks Application (pg. 15)**

Are 5,000+ in attendance expected? Yes No
If yes, complete and attach a **Traffic Control Application (pg. 16)**

Are street closures required? Yes No
If yes, complete and attach a **Traffic Control Application and a Street Closure Application (pg. 16)**

Are you having a raffle at the event? Yes No
If yes, complete and submit a [Charitable Raffle License Application](#)

Does your event include a carnival or circus? Yes No
If yes, contact the **City of Joliet Business Services Department at 815/724-3905** for additional information regarding additional applications or permits

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

SOUND AMPLIFICATION

Sound Amplification Fee: \$20.00

Starting and Ending time of amplification: _____

Type of outdoor amplification:

- PA System
 DJ
 Live Band
 Other (please describe)

Location of outdoor amplification _____

Is the property within 300 feet of the property line of any Hospital, Church, School or Courthouse?

- Yes
 No
 If yes, name and address of institution:

Name of musical group or DJ performing: _____

Street address: _____

City: _____ State: _____ Zip code: _____

Contact name: _____ Phone: _____

Please initial

- I have read, understand, agree and will fully comply with Chapter 25½ Public Gatherings Section 25½ -9 Playing of Music and the following:
- The person listed on the application as having authority to control noise for the event must remain at this event until its completion and shall be available to accept any complaints
- The sound amplification permission is limited to the date and time specified on the application but in no event shall begin before 7:00 a.m. or continue after 11:00 p.m.
- The volume of sound shall be so controlled that it will not be unreasonably loud, raucous, jarring, disturbing or a nuisance to reasonable persons of normal sensitiveness within the area of audibility
- Upon request by a police officer, the sound level of the live music or amplified sound shall be lowered or shut off. Failure to do so may result in the issuance of a compliance ticket

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

TEMPORARY LIQUOR LICENSE APPLICATION

Liquor License Fee: \$50.00

Starting and Ending time of Liquor Service: _____

Type of Liquor being Served:

Beer Wine Spirits Other (please describe)

Location of Liquor Service (address of event): _____

Applicant Name: _____

Business/Organization: _____

Street address: _____

City: _____ State: _____ Zip code: _____

Applicant Phone: _____ Email: _____

Business/Organization is a: Non-Profit Business Other (please describe)

List up to Three (3) People Responsible for Serving Alcoholic Beverages During the Event

Name:	Phone:	Age:
Name:	Phone:	Age:
Name:	Phone:	Age:

THE FOLLOWING ITEMS MUST ACCOMPANY APPLICATION FOR LIQUOR LICENSE:

1. A Certificate of Insurance showing coverage for commercial, general, or liability insurance and dram shop (liquor liability) insurance naming the City of Joliet as additional insured and listing the City of Joliet, 150 West Jefferson Street, Joliet, IL as a certificate holder.
2. Site Map (include area where alcohol will be sold and consumed, fences and barricades).
3. Security Plan (include a description of security measures, procedures for carding minors and preventing over-consumption of alcohol).
4. Proof of not-for-profit status (articles of incorporation, tax exempt number).

Name of Event:	Date of Event:
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Return Applications to: City of Joliet, City Clerk-Special Events, 150 West Jefferson Street, Joliet, IL 60432
cojspecialevents@jolietcity.org



SPECIAL EVENT APPLICATION

TEMPORARY TENT / STAGE / AIR-SUPPORTED STRUCTURE / BLEACHERS PERMIT APPLICATION

Tent Inspection Fee: \$13.00 per tent Stage Inspection: \$50.00 per stage

Applicant Name: _____

Street address: _____

City: _____ State: _____ Zip code: _____

Applicant Phone: _____ Email: _____

Type and Quantity of Temporary Structure(s):

Tent # _____ Stage # _____ Air-Supported Structure # _____ Bleachers # _____

Location of Structure(s) (address of event): _____

(Indicate location of all structures, parking, all existing facilities and features on required site map)

Size/Dimensions of Structure(s): _____

Dates of Temporary Structure(s) (not to exceed 30 days):

Installed: _____ In Use: _____ Dismantled: _____

Certificate of Proof for Fire Resistance: YES (attach certificate) NO

(Article 18, Section F-1801.3 BOCA Basic Fire Prevention Code)

Issued by: _____ Issue Date: _____

Signature of Applicant: _____

Signature of Property Owner: _____ Ph. _____

Structural drawings & calculations must accompany any stage permit application

Office Use Only: Per Occupant: 7 sq. ft./chairs; 3 sq. ft./standing

Occupant Load Limit/sq.ft. _____ # of Exits: _____

Permit Approved by: _____ Date: _____

Name of Event:

Date of Event:



SPECIAL EVENT APPLICATION

FIREWORKS APPLICATION

Applicant Name: _____

Business/Organization: _____

Pyrotechnic Distributor/Production Company:

Company Name: _____

Street address: _____

City: _____ State: _____ Zip code: _____

Phone: _____ Email: _____

Lead Pyrotechnic Operator: _____

Assistant Operators: _____

Are these individuals employees of the above company? YES NO

If No, please list Employer Name and Address:

Company Name: _____

Street address: _____

City: _____ State: _____ Zip code: _____

THE FOLLOWING ITEMS MUST ACCOMPANY APPLICATION FOR A FIREWORKS PERMIT:

1. Lead Pyrotechnic Operator’s License—BATFE license (ATF)
2. Site Map (include area where fireworks will be setup and the Fireworks Truck placarded).
3. Proof of Illinois Workmen’s Compensation Insurance

The Permit Holder does hereby release, acquit, discharge, indemnify, and hold harmless the City of Joliet, their officers, personnel, employees and agents from any and all causes of action, including personal injury, illness, death, property damage, cost, charges, claims, demands, and liabilities of whatever kind, name or nature, or nature in any manner arising from the use of any kind or in any manner of fireworks or pyrotechnics.

The Permit Holder hereby agrees not to initiate suit or any form of litigation or judicial proceedings or to make any claim or claims of any type against the City of Joliet, their officers, personnel, employees an agents to include but not limited to death, personal injury, medical claims or property damage, directly or indirectly relating to or arising from or arising out of or by reason of the use of any kind or in any manner of fireworks or pyrotechnics.

I agree to the above terms:

Applicant Signature: _____ Date: _____

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

TRAFFIC CONTROL PLAN (Street Closure and/or 5,000+ attendance)

Traffic Contact Person: _____

Phone: _____ Email: _____

Please explain the proposed traffic control for this event: _____

Expected attendance _____

Will you be hiring Joliet Police Officers for traffic control? YES NO

Please complete the following:

Date(s) Officers Needed: _____

Time of Traffic Control: Start: _____ End: _____

Location of Traffic Control: _____

THE FOLLOWING ITEMS MUST ACCOMPANY THE TRAFFIC CONTROL PLAN:

1. Site Map (Movement of traffic to and from event must be *CLEARLY MARKED*).

STREET CLOSURES

Please indicate below (use additional pages if necessary) what street closures are being requested.

Street Name: _____ between _____ and _____

Date: _____ Time: Starting _____ Ending _____

Street Name: _____ between _____ and _____

Date: _____ Time: Starting _____ Ending _____

Street Name: _____ between _____ and _____

Date: _____ Time: Starting _____ Ending _____

THE FOLLOWING ITEMS MUST ACCOMPANY THE STREET CLOSURE REQUEST:

1. Site Map (location of barricades, closed streets/public right-of way and/or the parade/run/bike route, if applicable, must be *CLEARLY MARKED*).

Name of Event:

Date of Event:



SPECIAL EVENT APPLICATION

CHECKLIST OF COMPLETED APPLICATION

Before you submit your application to the City of Joliet,
Please make sure that the following steps have been completed.

- Remove pages 1-3 for your reference
- Complete, sign and date Application (General Event Information pages 4-10)
- Attach insurance coverage information
- Attach Site Map/Route Map indicating layout of event/route and other required information as listed on page 10.
- Include payment

If necessary,

- Attach the Temporary Liquor License Permit Application and all required documents listed on page 13.
- Attach the Temporary Tent / Stage / Air Supported Structure Application and all required documents listed on page 14.
- Attach **and sign** the Fireworks Application and all required documents listed on page 15.
- Attach the Traffic Control Plan, page 16
- Attach the Street Closure Plan, page 16

Would you like your event to be advertised on the City's website? YES NO
If yes, please include a flyer or other promotional information with this application.

• Attach only those documents required by the Event

Signature of Organizer _____ Date _____

Name of Event:	Date of Event:
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